IT Initiative Supplement

February 25, 2010

I. Project Description

Project Title: Facilities Electronic Health Records

Brief Description of the Project Title: Assess the needs and capabilities of the systems in the institutions to be in compliance with and obtain the benefits from the various Health Information Technology (HIT) and Electronic Health Records (EHR) initiatives currently underway nationwide.

Statewide Priority: 1 **Agency Priority:** 1

Estimated Completion Date: FY2015

IT Project Biennium: FY2010-11, FY2012-13, FY2014-15

Request Number:

Version:

Agency Number: 6901

Agency Name: Department of Public Health and Human Services

Program Number:

Program Name: Director's Office

A. Type of Project (check all that apply)

Enhancement Replacement

New X

0&M

B. Type of System (check all that apply)

Mid-Tier Mainframe

GIS

Web

Network

Desktop

II. Narrative

C. Executive Summary

Montana Medicaid and its partners will work to achieve a sound and logical approach to health information exchange that produces the delivery of better health care for Montanans, including enhanced patient safety and improved coordination of care, by promoting the adoption of interoperable electronic health record systems and through the use of health information technologies meeting national standards. This is best accomplished through a public-private partnership, in collaboration with payers, providers, consumers and health information technology partners.

Project Purpose and Objectives:

OBJECTIVE 1 - ASSESSMENT OF THE 'AS-IS' HIT LANDSCAPE

Montana Medicaid currently does not have good information on the readiness of providers to participate in an electronic health record environment. Therefore, the first objective in this HIT P-APD is to conduct an 'As-is' assessment of providers potentially eligible to receive incentive payments under the ARRA. In addition an assessment will need to be completed of the current and future planned MMIS system capacity to implement the Provider Incentive Payment Program. Montana Medicaid used Medicaid Information Technology Architecture (MITA) in assessing the need for a new MMIS, and thus has an understanding of what is needed in MITA architecture. The MITA concepts, principles and tools will be used to assist in the key planning steps during the planning phase when assessing the current "As-is" HIT Landscape to the desired "To-be" HIT Landscape. This information will be used during the assessment and design for implementation of the Provider Incentive Payment Program. Development of the SMHP will include an analysis of the current and proposed MMIS to determine readiness to assume this work.

OBJECTIVE 2 – DEVELOPMENT OF THE TO-BE HIT LANDSCAPE – THE VISION

Montana Medicaid plans to include in discussion and activities with a variety of stakeholders within the state that include state officials, representatives of the state designated entity—HealthShare Montana, and providers. These activities will enable Medicaid to develop a common vision of how the Medicaid Provider Incentive Payment Program will work in conjunction with the larger statewide HIT plan. The result will be a vision for 2014 that will become the basis for the development of the Roadmap in objective 3.

OBJECTIVE 3 – EHR INCENTIVE PROGRAM DEVELOPMENT PLAN (ROADMAP)

Medicaid will develop a strategic plan on how to move effectively from the 'As is' environment to the full implementation of the Medicaid Provider Incentive Payment Program and the State HIT vision for 2014. This roadmap will also include a plan to evaluate measurable goals for Montana's progress in reaching that vision. An assessment of Montana's current and proposed MMIS system and those systems abilities to accommodate

the needs of this program and the vision for 2014 must be completed to know what MMIS changes are necessary for implementation.

OBJECTIVE 4 – SMHP DELIVERABLE

Montana Medicaid will work with its community partners, including Medicare, to design a program that allows Medicaid to efficiently and effectively achieve the following:

- Administer incentive payments to eligible providers and hospitals, including establishing a process to determine eligibility, assure system certification, and create a method to track meaningful use.
- Ongoing oversight of the incentive program including routine quality assurance checks of meaningful use attestations and reporting mechanisms.
- Pursuing initiatives, coordinating with community partners, encouraging the adoption of certified Electronic Health Record (EHR) technology that promotes health care quality, and exchanging of health care information.
- Assure no duplication of effort between Medicaid, CHIP and Medicare.
- Submit an approvable SMHP to Centers for Medicare and Medicaid Services.
- Submit an approvable I-APD to Centers for Medicare and Medicaid to request fungin to implement the SMHP.
- Development of an RFP to procure contractor services to implement changes to the MMIS if determined necessary during the planning stage

Technical Implementation Approach:

Project Schedule and Milestones:

Assess Current "As-is" Landscape	
Initial meeting with workgroups on goals and	5/14/2010
approach	
Develop and approval of assessment tool	7/23/2010
Summary of "As-is" results	10/22/2010
Leadership approval of "As-is" report	11/5/2010
Create HIT "To-be" Vision	
Initial discussion and activities with workgroups	5/14/2010
Draft the vision portion of SMHP	7/2/2010
Update vision based on "As-is" report	11/12/2010
Finalize vision document and get approval	11/26/2010
Leadership approval of "To-be" document	12/10/2010
Develop EHR Incentive Program	
Identify team and organize workgroup	6/4/2010
Define project requirements	10/8/2010
Coordinate with Medicare	On-going

Draft incentive plan with tasks and timelines	12/17/2010
Determine measures for benchmarks	1/14/2011
Revisions for roadmap and sent to key	
stakeholders	2/18/2011
Leadership approval of roadmap	3/11/2011
Complete SMHP	
Initial discussion and activities with workgroups	8/27/2010
Draft outline of SMHP as possible	9/17/2010
Draft SMHP with CMS guidance and reports	9/17/2010
from workgroups	
Review Draft with State Designated Entity	10/1/2010
,	
Obtain approval of SMHP	11/5/2010

D. Business and IT Problems Addressed

N/A

E. Alternative(s) N/A

Alternatives Considered:

Rationale for Selection of Particular Alternative:

F. Narrative Detail

III. Costs

G. Estimated Cost of Project:

Estimat	ed Cost of Project	FY2010	FY2011	FY2012	FY2013	FY2014	FY2015	Total
1.	Personal Services - IT Staff							0
2.	Personal Services - Non IT St	aff						0
3.	Contracted Services		75,000	1,000,000	25,000	25,000	25,000	1,150,000
4.	ITSD Services							0
5.	Hardware							0
6.	Software							0
7.	Telecommunications							0
8.	Maintenance							0

9.	Project Management							0
10.	IV & V							0
11.	Contingency							0
12.	Training							0
13.	Other							0
Tota	l Estimated Costs	0	75,000	1,000,000	25,000	25,000	25,000	1,150,000

Total Funding:

IV. Funding

H. Funding

Total Funding								
Fund		FY2010	FY2011	FY2012	FY2013	FY2014	FY2015	Total
1. 0110	0		75,000	1,000,000	25,000	25,000	25,000	1,150,000
2.								0
3.								0
4.								0
5.								0
6.								0
Total Estimate	d Costs	0	75,000	1,000,000	25,000	25,000	25,000	1,150,000

Cash/Bonded:

Bill Number:

V. Cost upon Completion

1. Operating Costs upon Completion

This is an ongoing effort and does not have a completion date.

FTE:

Personal Services Costs:

Operating Costs:

Maintenance Expenses:

Total Estimated Costs:

2. Funding Recap This is an ongoing effort and does not have a completion dat	te.
Fund Type:	
Amount:	
Total Funding:	
T/ D· I A	
V. Risk Assessment	
A. Current IT Infrastructure Risks	
1. Current application 10+ years old?	N/A
Date of last major upgrade?	
2. Current application is based on old technology? If yes, what is the current hardware platform, operating system, and prused to support the application?	N/A rogramming languages
3. Is the agency not capable of maintaining the current application with in	nternal technical staff?N/A
If yes, who supports the application today?	
4. Other IT infrastructure risks? If yes, provide further detail.	N/A
B. Current Business Risks	
1. What are the risks to the state if the project is not adopted?	
2. Does the current application meet current business requirements? If "no", what specific business functions does the application lack?	
C. Project Risk Assessment	
1. Describe any major obstacles to successful implementation and discuss will be mitigated.	s how those obstacles

Table H Risk Assessment

Description	Severity (H/M/L)	Probability of Occurrence (%)	Estimated Cost	Mitigation Strategy